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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

B.K.

Operator CONTINENTAL OIL COMPANY	
Address Box 460 Hobbs N.M. 88240	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain) Request Testing Allowable of 3000 bbls. We understand this will be deducted from Allowable when I.P. is filed	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name JICARILLA 28	Well No. 15	Pool Name, including Formation LINDRITH GALLUP DAKOTA, West	Kind of Lease State, Federal or Fee Federal	Lease No. CONTRACT NO. 66
Location Unit Letter K ; 2310 Feet From The South Line and 1580 Feet From The West				
Line of Section 34 Township 25-14 Range 4-W, NMPM, RIO ARKIDA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> SHELL OIL COMPANY	Address (Give address to which approved copy of this form is to be sent) FARMINGTON, N.M.	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> EL PASO NATURAL GAS	Address (Give address to which approved copy of this form is to be sent) EL PASO, TEXAS	
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 28
	Twp. 25	Rge. 4
	Is gas actually connected? No	
	When	

If this production is commingled with that from any other lease or pool, give commingling order number:

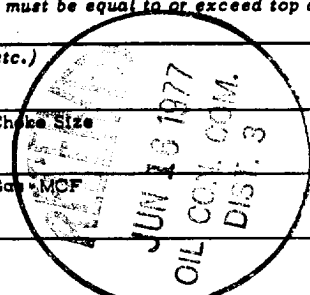
IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 4-20-77	Date Compl. Ready to Prod. 6-10-77	Total Depth 7778	P.B.T.D. 7692					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation LINDRITH GALLUP DAKOTA	Top Oil/Gas Pay 7440	Tubing Depth 7641					
Perforations 7640, 44, 52, 56, 7593, 96, 99, 7457, 58, 60, 36, 38 6736, 38, 42, 44, 6612, 14, 16, 18, 19, 6560, 62, 63			Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4	8 5/8	536	300					
7 7/8	5 1/2	7737	1075					
	2 3/8	7641						

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 6-10-77	Date of Test	Producing Method (Flow, pump, gas lift, etc.) FLOW	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF



GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

V. J. Lujan (ack)
District Engineer
6-6-77
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

Original Signed by A. R. Kendrick

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

11 mccc-AZtec (5) USGS-Duenago (2) BEA file